

ARCHITECTURE & ENGINEERING UTILIZATION REPORT

MONTHLY REPORT (PARTS 1A & 1B) FINAL REPORT (PARTS 1A, 2 & 3)

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PA	RTS 1A & 1B	This part is to	o be co	mpleted by	y the Prir	ne Consult	ant and	forwarde	d to th	e User	Department		
uspens	sion of any payment or p	ropolitan Dade County. Fa part thereof, termination o lic servant in the performa	r cancellation	of the contract, and	the denial to part	icipate in any further	contracts award	ed by MDC. Purs	uant to Flori	da Statues (F.	S.) 837.06, whoever know		
Α	REPORTI	ING PERIOD		PROJECT NAME						PROJEC	T NO.		
	FROM: PROJECT LOCATION TO: USER DEPARTMENT		N					NTP D	ATE				
=			Т										
			USE	R DEPT. PROJ. MAN	AGER			PHON	NE		FACS	FACSIMILE	
	AMOUNT REQUISITION	NED THIS PERIOD			AMOUN	IT REQUISITIONED TO	DATE			AMOUNT PAID TO DATE			
AMOUNT SUBS REQUISITIONED THIS PERIOD				AMOUNT S	JNT SUBS REQUISITIONED TO DATE				AMOUNT	PAID TO SUBS TO DATE			
PRIME CONTRACTOR					CONTRACT A			CHANGE ORDER MODIFICATION AMOUNT		ADDITIONAL SERVICES AMOUNT			
				DATE	AGR	EEMENT AMOUN	ENT AMOUNT		AWOUNT				
	NAME OF FIRM ADDRESS						SCHEDI	ILE COMPLETION DA	\TF			GE OF CONTRACT	
TELEPHONE		FACSIMILE				MANAGER (PRIME CONTR.)			СО	MPLETED			
_													
В						SUBCON	SULTANTS		\$ AMO	UNT SUB			
NAME OF SUBCOM		NSULTANT AGREEMENT AMOUNT		DESCRIPTION OF WORK					IONED THIS RIOD	AMOUNT PAID TO SUB TO DATE	ACTUAL STARTING DATE	SCHEDULED COMPLETION DATE	
-													
AUTHORIZED SIGNATURE OF PRIME CONTRACTOR			PRINT NAME			TITLE			DATE				
		This			41 11			·	I (. DE	<u> </u>			
C	DUNTY USE	This part is to	o pe co	mpleted by	y the Use	er Departme	ent and f	orwarded	to DE	upo	n approval.		
AUTHORIZED SIGNATURE OF PROJECT MANAGER					PRINT NAME				DA	TE.			

ARCHITECTURE & ENGINEERING UTILIZATION REPORT - FINAL ONLY

PART 2	This part is to be completed by the Subconsultants and forwarded to the Prime Consultant.									
SUBCONSULTANTS										
NAME OF	FSUBCONSULTANT	TOTAL AGREEMENT AMOUNT	FINAL SUB REQUISITION AMOUNT	TOTAL PAID TO DATE TO SUBCONSULTANT	TOTAL SUB REQUISITIONED TO DATE	DATE OF WORK COMPLETION	GOAL (%) IF APPLICABLE			
AUTHORIZED SIGN	IATURE OF SUBCONSULTANT									
PART 3	This part is to be ex	vocuted by the Dr	ima Cancultant	and forwards	d to the User Depar	tmont				
PARTS	This part is to be ex	keculed by the Pr	illie Collsultant	and forwarder	u to the Oser Depar	unent.				
				Sworn before me	э :					
SIGNATURE O	F AFFIANT (PRIME CONSULTANT)		TITLE		This day of	, 2002				
PRIN	TED NAME OF AFFIANT		DATE		NOTARY PUB	LIC				
COUNTY USE	This part is to be co	ompleted by the L	Jser Departmen	t and forwarde	ed with Final Requi	sition to DBD.				
AUTHORIZED SI	GNATURE OF PROJECT MANAGER		PRINT NAME		DATE					